

**LIMITED PARTNERSHIP**

**STATE OF MAINE**

**AMENDED ANNUAL REPORT**

\_\_\_\_\_  
(Name of Limited Partnership)

\_\_\_\_\_  
Deputy Secretary of State

Pursuant to [31 MRSA §529-A](#), the undersigned limited partnership executes and delivers the following Amended Annual Report:

**FIRST:** The jurisdiction of its organization is \_\_\_\_\_.

**SECOND:** The original annual report was filed on (date) \_\_\_\_\_.

**THIRD:** The information has changed as follows (attach additional pages, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOURTH:** This information changed on (date) \_\_\_\_\_.

- An amended annual report may be filed by the limited partnership to change information currently on file. The time for filing an amended annual report is from the date of the original filing until December 31<sup>st</sup> of that filing year.

DATED \_\_\_\_\_

General Partner(s)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(type or print name)

For General Partner(s) which are Entities

Name of Entity \_\_\_\_\_

By \_\_\_\_\_  
(authorized signature)

\_\_\_\_\_  
(type or print name and capacity)

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\*Certificate **MUST** be signed by

(1) at least one **general partner OR**

(2) any duly authorized person.

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under [17-A MRSA §453](#).

Please remit your payment made payable to the Maine Secretary of State.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,  
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**